

Dear Homecare Workers and Personal Support Workers,

There are some changes coming to In-Home Services Programs administered by Aging and People with Disabilities (APD), Office of Developmental Disability Services (ODDS) and Addictions and Mental Health (AMH). This packet covers information related changes with the voucher, the transition to twice monthly authorizations for all Homecare Workers (HCWs) and Personal Support Workers (PSWs), and important new payment cycle dates.

The transition to twice monthly authorizations and the new payment cycle will begin statewide **January 1st, 2016**. All HCWs and PSWs will receive two vouchers each month; one for the 1st – 15th and another for 16th through the end of the month. Only HCWs and PSWs who currently receive one voucher each month will see a change.

All HCWs/PSWs who turn in a voucher with services provided prior to **January 1st, 2016** will be paid within 2 business days.

See HCW Payroll Calendar on page 3

DHS will begin to use a new voucher to assist in meeting Department of Labor (DOL) enhanced record keeping requirements. Prior to implementing the new voucher the department completed a pilot with five offices across the state. After reviewing the results of the pilot the department decided to stagger the rollout of the new voucher to provide in-depth training to both HCW/PSWs and state staff. You will see more detailed information related to training dates and locations in a future mailing.

See Overview of New Payment Voucher on pages 4 – 6

Included in this packet is a copy of the ***Provider Time Tracking Sheet (pages 7 – 8)***. The sheet is for HCW/PSWs to keep track of time being logged on the voucher. Because you will only receive one copy of the voucher for each service period it is important that you keep a separate record of your time. You may make copies as necessary. Local offices will also have copies available upon request. This tool is not required for payment, only to help keep track of your time in / time out information. If you are using another tool to track time in / time out information continue to do so. Based on the HCW Guide you are required to keep a copy for your records in case of an audit.

During the pilot a list of frequently asked questions was gathered to give additional information to HCW/PSWs who are unclear about the new voucher.

See Frequently Asked Questions on pages 9 - 10

If you provide hourly services to someone who lives with you see the attachment titled *‘Recording your time when you live with your consumer/employer’*.

Please keep your eyes open for the HCW/PSW training schedule to see dates and times near you! Thank you for taking the time to review this material.

Sincerely, Provider Time Capture Project team!

Homecare Worker Payroll Calendar

January – June 2016

Any 2015 Vouchers will be paid within 2 days of submission.

New payroll timeline starts with January 2016 Vouchers.

S	M	T	W	Th	F	S	January - 2016	February - 2016	S	M	T	W	Th	F	S
					1	2				1	2	3	4	5	6
3	4	5	6	7	8	9			7	8	9	10	11	12	13
10	11	12	13	14	15	16			14	15	16	17	18	19	20
17	18	19	20	21	22	23			21	22	23	24	25	26	27
24	25	26	27	28	29	30			28	29					
31															
S	M	T	W	Th	F	S	March - 2016	April - 2016	S	M	T	W	Th	F	S
		1	2	3	4	5								1	2
6	7	8	9	10	11	12			3	4	5	6	7	8	9
13	14	15	16	17	18	19			10	11	12	13	14	15	16
20	21	22	23	24	25	26			17	18	19	20	21	22	23
27	28	29	30	31					24	25	26	27	28	29	30
S	M	T	W	Th	F	S	May - 2016	June - 2016	S	M	T	W	Th	F	S
1	2	3	4	5	6	7						1	2	3	4
8	9	10	11	12	13	14			5	6	7	8	9	10	11
15	16	17	18	19	20	21			12	13	14	15	16	17	18
22	23	24	25	26	27	28			19	20	21	22	23	24	25
29	30	31							26	27	28	29	30		

Key to HCW Payroll Calendar

- = Voucher Submission Deadline
- or #\$ = Pay Date (Payments issued)
- = Holiday or Office Closure

You have received several other mailings regarding the new payment cycle and pay dates taking effect for vouchers with pay periods beginning in January 2016. These mailings provided a calendar with voucher submission dates, pay dates and holidays.

- ❖ You will have 3 business days after the end of each service period to turn your voucher in to a local office.
- ❖ In January of 2016 the first service period ends Friday January 15th. Monday January 18th is a holiday and offices are closed. The 3rd business day after the 15th is Thursday January 21st.
- ❖ Your correctly completed and legible voucher must be turned into the office before it closes on the 21st to guarantee you receive your check on time.
- ❖ Vouchers with errors or that cannot be read by staff do not meet the completion requirements. It is the HCW/PSW responsibility to correct the voucher prior to the 8th business day to be included in the normal payment issue cycle.
- ❖ For service period authorized 1/1/2016 – 1/15/2016 the check issue date is February 2nd 2016.

If you have questions or concerns about new submission dates or pay dates please contact
SEIU Member Resource Center at 1 (877) 451-0002

Overview of New Payment Voucher for In-Home hourly care workers

As a result of changes in federal Department of Labor (DOL) Fair Labor Standards Act (FLSA) laws In-Home Services Programs are now required to track hours worked per day by HCW/PSWs. It is very important to **write clearly** on this voucher. If staff cannot read the information **you cannot be paid**.

You will only receive one copy of the new voucher for each service period. It is important that you keep a separate record of your time in case your voucher is misplaced or there is a question about any of the information reported. **See *Provider Time Tracking Sheet* (pages 7 – 8).**

The front page of the voucher now includes instructions and examples to help you complete the voucher. The ‘*How to fill in your new voucher*’ portion of the voucher explains the required fields needed to correctly complete your voucher. It also shows examples of an HCW/PSW reporting a split shift after taking a 30 minute break from 12:00 pm until 12:30 pm. The example also shows reporting a graveyard shift crossing over midnight. The HCW/PSW splits their shift that started at 8:30 pm on the 9th and ended at 4:00 am on the 10th. The first shift has an end time of 12:00 am and the second part of the shift has a begin time of 12:00 am.

Provider Statement of Understanding:

Payments will be made based on time in and time out reporting. Vouchers submitted without time in and time out fields completed will not be processed. Payment will not be made for any services provided over the maximum authorized unless prior approved by a case manager. The total hours provided field is optional and is intended to provide additional validation of hours worked.

HCWs may not impose any other charges or costs to the consumer-employer (*recipient*), the Department, Area Agency on Aging or any CDDP/Brokerage under this agreement. Any falsification or concealment of a material fact may be prosecuted under federal and state laws.

If for any reason you do not understand this information contact legal representation.

How to fill in your new voucher

The following fields must be completed to be accepted as a correctly completed voucher.* Please remember, you cannot be paid if your voucher is not correctly completed.

1. In the ‘Date’ column enter the month and day that you are working (*e.g., 09/02*)
2. In the ‘Start Time’ column enter the time you begin your shift (*e.g., 10:00, 10:30, 11*).
Make sure to mark AM or PM
3. In the ‘End Time’ column enter the time you completed your shift (*e.g., 2, 2:30*). *Make sure to mark AM or PM*
4. In the ‘Mileage Provided’ field enter total service mileage provided for the pay period.

*The ‘Total hours provided’ field is not required for voucher to be accepted.

Recipient name:				Recipient #:			
Provider name:				Provider #:			
Representative name:				Case worker:			
Service period auth:				Service period worked: 9/2/15 – 9/10/15			
Total hours authorized: @ \$RATE				Total hours provided: 17:31 OPTIONAL			
Mileage authorized: @ \$RATE				Mileage provided: ④ 15			
①	Date	②	Start Time	③	End Time		
	9/2		9:00 AM PM		12 AM PM		3
	9/2		12:30 AM PM		3:47 AM PM		3:17
	9/5		9 AM PM		12:45 AM PM		3:45
	9/9		8:30 AM PM		11:59 AM PM		3:29
	9/10		12:00 AM PM		4 AM PM		4

Overview of New Payment Voucher for In-Home hourly care workers

The second page of the voucher has the service plan authorization information at the top. Each time you receive a voucher you should confirm that information in this area is correct, including;

- ❖ The recipient name
- ❖ Recipient #
- ❖ Your name and your provider #,
- ❖ The Case worker information,
- ❖ The service period auth.,
- ❖ The hours authorized, and
- ❖ Any mileage that was authorized.

Recipient name: Recipient, Sample A		Recipient #: AA###A#AA
Provider name: Example A Provider		Provider #: #####
Representative name:		Case worker: RK STR
Service period auth: 01/01/2016 – 01/15/2016		Service period worked:
Total hours authorized: 40 @ \$13.75	Total hours provided: OPTIONAL	
Mileage authorized: 10 @ \$0.48	Mileage provided:	

If any of this information is incorrect contact a worker right away.

The second page also has the new time tracking columns where you will report your shift information. Each time you go to work or begin providing an authorized service from the task list for your consumer/employer you will report the date, the time you began working and the time you finished working being sure to clearly mark AM or PM.

Date	Start Time	End Time	
	AM PM	AM PM	
	AM PM	AM PM	
	AM PM	AM PM	
	AM PM	AM PM	
	AM PM	AM PM	
	AM PM	AM PM	
	AM PM	AM PM	

The third page is a continuation of hourly shifts that you provided, if you run out of space contact the local office and track your shifts on notebook paper or on your time tracking sheet.

Overview of New Payment Voucher for In-Home hourly care workers

The fourth page (back page) has a new section for *Notes to Case Worker*. This is an opportunity to provide some care notes to the case worker on a regular basis. It will help both you and the case manager track changes to your consumer/employer's condition over time.

It is not to be used to report or request extra hours or vacation.

The lower portion of the voucher has the signature fields for you and your consumer/employer. This area must be signed by both you and your employer **after** all services have been provided for the authorized period. If your employer is unable or unwilling to sign the completed voucher contact a case worker right away.

Notes to Case Worker (attach additional pages as needed):
<p>I affirm that the services reported on this voucher are for actual dates and times I worked by delivering the service/supports on the consumer-employer's task list. The hours I am claiming do not exceed the total hours authorized to me and were delivered according to the consumer-employer's service plan. I understand that these vouchers will be audited periodically, and that the information reported is true, accurate and complete.</p>
<div style="display: flex; justify-content: space-between;"> ➡ Employee Signature: _____ Date: _____ </div> <div style="margin-top: 10px;"> I no longer work for the consumer-employer as of _____ (Last day worked) </div>
<p>By signing this voucher, I affirm that the hours reported on this voucher are for actual dates and times worked by the provider delivering the authorized services/supports and do not exceed the total amount of hours authorized in the service plan.</p> <p><u>FOR APD & AMH EMPLOYERS ONLY:</u> I designate the Department an agent for the purpose of doing all that is required by myself pursuant to Section 3504 of the Internal Revenue Code (This designation is not applicable if the payee is a private firm or agency employee).</p>
<div style="display: flex; justify-content: space-between;"> ➡ Employer/Rep Signature: _____ Date: _____ </div>
<p><u>For DD Only:</u> CDDP/Brokerage Review: This voucher has been reviewed and is consistent with the consumer-employer's service plan and authorized service limits.</p>
<div style="display: flex; justify-content: space-between;"> ➡ CDDP/Brokerage Rep Signature: _____ Date: _____ </div>

Provider Time Tracking Sheet

THIS IS NOT A PAY VOUCHER.



This page is only for **you** to keep **track** of the days and hours you work. If you lose your voucher, you must contact your consumer/employer's case manager to get a replacement voucher.

You cannot be paid by turning in this document.

[illegible]

Provider Time Tracking Sheet

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[illegible]

Frequently Asked Questions

- ❖ How do I report working multiple shifts in the same day?
 - a. *If you take a break during the day you need to list the two shifts separately. See **Page 1** of the new voucher.*
Example: You worked from 9:00 am – 12:00 pm & 12:30 pm – 3:47 pm you would fill in two lines
- ❖ How do I report working past midnight, across two days?
 - a. *If you work a shift that goes past midnight you must report as two shifts. See **Page 1** of the new voucher.*
Example: You worked from 8:30 pm – 4:00 am without taking a break, you would fill in two lines; 8:30 pm – 12:00 am & 12:00 am – 4:00 am
- ❖ Do I record the whole time I'm with my consumer/employer, even if I'm not working the whole time?
 - a. *No, only record time you are providing authorized services from the task list to your consumer/employer.*
- ❖ What if I provide services to more than one consumer/employer at a time?
 - a. *If you provide services to more than one consumer/employer at a time, like meal preparation or laundry, you must split the total time between the consumer/employers evenly.*
Example: You completed laundry for 2 of your consumer/employers and it took you 1 hour from 1:00 pm – 2:00 pm. You will report you worked for consumer/employer A from 1:00 pm to 1:30 pm and for consumer/employer B from 1:30 pm – 2:00 pm.
- ❖ When can I turn in a voucher?
 - a. *You may turn in your voucher any date after you are done providing services for the period.*
 - b. *If you will no longer be working for your consumer/employer, report the last day worked under your signature on the back page of the voucher.*
 - c. *You may submit your voucher in-person, through the mail, via fax or through email. Contact your local office for instructions to fax or email vouchers.*
- ❖ What if I lose my timesheet with all of the day-to-day entries on it?
 - a. *You will receive one copy of the new voucher at the beginning of each service period. It is important that you keep track of your time for your own records.*
 - b. *A sample tracking sheet has been provided for your use. You may copy as needed. (See pages 7 - 8)*
- ❖ How many hours am I allowed to work for one consumer/employer?
 - a. *You may work up to the number of hours that have been authorized to you on your voucher. You can find this by looking at the 2nd page of your voucher, 'Total Hours Authorized'. (See page 5)*
 - b. *Any hours reported that are more than those authorized on your voucher must be prior approved by a Case Manager, or they will not be paid.*
- ❖ What if my consumer/employer's health, safety, or well-being is at risk and I'm out of hours or the next scheduled HCW is a no-show for their regularly scheduled shift?
 - a. *You may stay to ensure that your consumer/employer's health, safety or well-being is no longer at risk.*
 - b. *You must report the additional time and the risk to your consumer/employer to a case manager within 2 business days of the event. If additional time is not reported within 2 business days it may not be paid.*

Frequently Asked Questions

- ❖ What if my consumer/employer needs more care than is authorized by their case manager?
 - a. *If your consumer/employer has care needs that are not covered in the service plan your consumer may contact their case manager for a new assessment.*
 - b. *You or your consumer/employer may feel that there are unmet needs in the service plan or fewer hours available than needed. The Oregon Administrative Rules allow for a specific amount of hours to be authorized by the case manager based the consumers need level.*
 - c. *You may choose to provide additional care, beyond the hours authorized, as a natural support. You will not be paid for time spent caring for your consumer/employer as a natural support.*
- ❖ Can I be paid to drive my consumer/employer to the doctor's office?
 - a. *Homecare Workers cannot be paid for mileage via the in-home voucher for travel to or from a doctor, dentist, physical therapist, or other medical provider.*
 - b. *Homecare Workers may only be paid for the time it takes to get to or from a medical appointment if the consumer/employer requires redirection or other hands on care during transportation.*
- ❖ What kind of mileage can I be paid for?
 - a. *Mileage can be paid via the voucher when travel is provided for reasons related to an eligible individual's service needs.*

Examples: *Shopping, errands, and other reasons that are prior-authorized by the Case Manager.*

Recording your time when you live with your consumer/employer –

1st – Determine if you are an hourly HCW or a live-in HCW

- An **hourly** HCW is someone who is authorized to provide Medicaid services on an hourly basis.
 - They must have passed a background check by the CEP unit within the last two years
 - They must have an active provider number
 - Must have been hired by a consumer and assigned by a case manager to provide services.
- A **live-in** HCW has additional requirements and expectations.
 - They must be available to provide hands on care 24 hours per day
 - They may not provide services to others on days they are providing '**live-in**' care
 - Their consumer/employer's need level has been assessed to meet live-in program requirements
 - These consumer/employers require a higher level of care based on the assessment.

IF YOU ARE NOT SURE, ASK THE CASE MANAGER

2nd – Determine the hours of Medicaid services you have been authorized to provide per day.

It can be hard to differentiate between authorized services and other support that a roommate or family member might provide. To use the new voucher you must report time in and out for **only** the authorized services provided from the task list. Use the process below to fill in the voucher.

We recommend that you and your consumer/employer set a schedule.

1. Determine the authorization period on the voucher.

Service period auth: 10/16/2015 - 10/31/2015

- a. This voucher is authorized for 10/16 – 10/31, which equals **16 days**
- b. If you do not work each day of the pay period, use the number of days you do work in the pay period.

2. Determine the hours that have been authorized for the period.

Total hours authorized: 31.50 @ \$13.7500

- a. This voucher is authorized **31.5 hours** for the period.

3. Divide the hours authorized by the number of days in the pay period.

$$31.5 \div 16 = 1.96875 \text{ **hours per day**}$$

- a. This means 1.96875 hours have can be claimed each day during the authorization period.
- b. $1.96875 \approx 1 \text{ hour and } 58 \text{ minutes}$ ($0.96875 \times 60 = 58.125$) hours per day

4. Select a time frame that is equal to the **hours per day**.

10:00 am to 11:58 am, or 11:00 am to 12:58 pm, or 12:00 pm to 1:58 pm

5. Enter this time on your new voucher for each day of the pay period you work.

- a. If you did not work each day of the pay period make sure your voucher matches.
- b. If you calculated hours per day using only 10 days, there should only be 10 shifts.

$$31.5 \div 10 = 3.15 \text{ **hours per day**}$$
 (0.15 X 60 = 9 minutes) 3 hours and 9 minutes

10:00 am to 1:09 pm, or 11:00 am to 2:09 pm, 12:00 pm to 3:09 pm

Case managers understand more care may be provided than hours authorized. However, payments are made based on the need based assessments completed by the case manager.

You cannot be paid for hours that are not prior authorized.